

## Ferguson, Vicki

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**From:** Lauren E. Weissenborn [weissenbornl@waterborne-env.com]  
**Sent:** Wednesday, March 19, 2014 12:10 PM  
**To:** R8FOIA  
**Cc:** Linda Johnson  
**Subject:** 2012 and 2013 SDWA Data Request for Wyoming and Region 8 tribal systems  
**Attachments:** StateDatarequest form\_2013.pdf

To Region 8 FOIA Officer,

As indicated in the electronic FOIA form that I submitted online, the data fields desired are included in the attached document <<StateDatarequest form\_2013.pdf>>. For the tribal system data, we would like to also get the state in which the tribal system is located. We are requesting 2012 data again in order to capture any additional data that might have been missed in our requests last year.

If you have any questions, please contact Linda Johnson at 703-777-0005

Thank you for your time and assistance.

Sincerely,  
Linda Johnson  
Senior Soil Scientist  
Waterborne Environmental, Inc.  
897-B Harrison Street, S.E.  
Leesburg, VA 20175

Phone: 703-777-0005  
Fax: 703-777-0767  
E-mail: [johnsonl@waterborne-env.com](mailto:johnsonl@waterborne-env.com)

## ***Requested Database Fields***

### ***Safe Drinking Water Act (SDWA) Data for Community Water Systems (CWS)***

#### **Please Respond To:**

Linda Johnson  
johnsonl@waterborne-env.com  
897-B Harrison Street, SE, Leesburg, VA 20175  
(703)777-0005  
Preferred Formats: .mdb, .accdb, .dbf, .txt, .xls, .xlsx, .csv

### **Requesting Atrazine, Simazine, Metolachlor, and S-Metolachlor Sample Data**

**Jan. 1<sup>st</sup> 2012 – Dec. 31<sup>st</sup> 2013**

#### ***Minimum Data Required (Primary Key Field is CWS\_ID):***

##### ***CWS Data***

<b>CWS_ID</b>	9-digit SDWIS ID Number Example: TX1090068
<b>CWS_Name</b>	Community Water Supply Name
<b>CWS_Water_Type</b>	Examples: GW - Ground Water, SWP - Purchased Surface Water
<b>CWS_Purch_From</b>	If this CWS Purchased Water, then List the Actual Source CWS_ID
<b>CWS_Category</b>	Community, Non-Community/Non-Transient, etc.
<b>CWS_City</b>	Primary City or Town Supplied
<b>CWS_County</b>	County Supplied
<b>CWS_Zip Code</b>	CWS Zip Code
<b>CWS_Pop_Served</b>	CWS Population Served
<b>CWS_Status</b>	CWS Active or Inactive Water Supply

##### ***Sample Data***

<b>Sample_Date</b>	Sample Collection Date
<b>Sample_Type</b>	Finished or Raw Water Sample
<b>Sample_Location</b>	E.g. Tap on Well 8, Storage Reservoir 2, Lab Sink, Flash Mixer
<b>Sample_Number</b>	State, Lab, or CWS Sample Number
<b>Sample_Water_Body_Class</b>	Sample Origin's class. E.g. Lake, Well, River
<b>Sample_Water_Body_Name</b>	E.g. Sugar River, East Lake, Well 5
<b>Sample_Water_Body_Type</b>	SW, GW, etc.

##### ***Lab Data***

<b>Sample_Result</b>	Sample Result in ppb 4-Fields (Atrazine, Simazine, Metolachlor, and S-Metolachlor)
<b>Result_Qual</b>	Detection or Non-detection 4-Fields
<b>Detection_Limit</b>	MDL and/or LOQ (Method Detection Limit and/or Limit of Quantitation)
<b>Analyzed_Date</b>	Date the Sample was Analyzed
<b>EPA_Method</b>	Test Method Examples: 505, 525.2, 508.1, and 551.1
<b>Lab_Name/ID</b>	Name or ID of Testing Laboratory

***Additional Fields Requested:*** Please include, using your judgment, any data which may increase the understanding of the reported results.